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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	<del> </del>	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/799,861	03/12/2004		Vijay Deshmukh		672	72-8061.US01	1723
TITLE OF INVENTION	: ON THE FLY SUMM.	ARIZATION OF FILE W	ALK DATA				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0		\$1510	10/29/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
LOVEL, KIMBERLY M		2167	707-101000				· · · · · · · · · · · · · · · · · · ·
<ol> <li>Change of correspondence address or indication of "Fee Address" (3 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident h in 37 CFR 3.11. Comp GNEE		THE PATENT (print or typed data will appear on the part a substitute for filing and (B) RESIDENCE: (CITY	atent. If an assign assignment. and STATE OR C	COUNTE	RY)	
NETAPP, INC. Sunnyvale, California							L
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🗵 C	orporatio	n or other private gro	up entity Government
Advance Order -	No small entity discount p	permitted)	<ul> <li>4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50 _ 2207 (enclose an extra copy of this form).</li> </ul>				
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NOTE: The Issue Fee an	d Publication Fee (if req		d from anyone other than t				
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